

MAINE DEPARTMENT OF AGRICULTURE
DIVISION OF ANIMAL HEALTH AND INDUSTRY
28 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0028
TELEPHONE: (207)287-3701 FAX: (207)624-5044

Disease Reporting Form

According to Sec. 32. 7 M.R.S.A. §1801 and 01-001 Chapter 206:Prevention and Control of Certain Diseases of Domestic Animals and Poultry, diseases or pathogens must be reported to the Maine Department of Agriculture, Division of Animal Health and Industry. Please complete and fax this form to 207/624-5062, or email it to Linda.Ward@maine.gov, or telephone your report by calling 207/287-7624.

Date of Report _____

Reporting Person/Veterinarian's Name, License Number, Clinic/Hospital Name:

Last Name First Name License Number Clinic/Hospital Name

Reporting Person/Veterinarian's Telephone and Fax Number:

Telephone Number Fax Number

Name of disease, pathogen or syndrome: _____ Check one of the following: Suspicion ____ Confirmed ____

Location of Animals:

Owner's Address:

Street

Name phone number

City County

Street

State Zip

City County State Zip

Please fill in the following information (if applicable):

Onset Date	Type of Species	Number affected/dead	Age(s)	Gender(s)

Actions taken prior to notification of the Division of Animal Health and Industry? (ie, diagnosis tests/results, etc.)

Name of private or state laboratory used for sample testing:

Name of Private or State Laboratory Used where diagnosis was accomplished:

Recent Travel History (if applicable):

State/Country Dates

_____ from ____/____/____ to ____/____/____

_____ from ____/____/____ to ____/____/____

_____ from ____/____/____ to ____/____/____